

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

December 19, 2017

Sheriff David G. Beth Kenosha County Sheriff's Department 1000 55th Street Kenosha, WI 53140

RE: 2017 Annual Inspection, Kenosha County Detention Center

Dear Sheriff Beth:

The 2017 annual inspection of the Kenosha County Detention Center (KCDC) was completed on October 25, 2017, pursuant to Wisconsin Statute 301.37(3). The inspection involved a comparison of the Detention Center and its operation to the Department of Corrections Administrative Code, Chapter DOC 350, and to applicable state statutes.

The Kenosha County Detention Center has a rated capacity of 603, and on the date of inspection there were 519 individuals confined at the facility (493 male, 26 female). As noted in past years, Kenosha County continues to house a significant number of federal inmates for the U.S. Marshals Service and Immigration and Customs Enforcement. This report summarizes the findings of the inspection and identifies improvements since the last annual inspection, as well as any applicable recommendations.

INSPECTION SUMMARY

Summary of Progress from the Previous Year

Since the last annual inspection in 2016, a number of operational changes and improvements have been realized at the Kenosha County Detention Center. Some of these changes and improvements include the following:

- ➤ Lieutenant Eric Klinkhammer has been added to the Detention Services Division to oversee the operation and management of the Detention Center.
- An inmate tablet system has been implemented at the Detention Center through a contract with GTL. Each inmate at KCDC is provided with a tablet where they can access the

inmate handbook, law library, and other facility materials. For a monthly fee, inmates can also make outgoing telephone calls, order canteen, listen to music, read books, and view current news events. Many of the applications available are at no charge to the inmate population.

➤ The Detention Services Division has upgraded its jail management system by implementing the New World software program.

- ➤ The Work Crew staff that monitor inmates outside of the facility has fully transitioned from sworn Deputy Sheriff's to direct supervision officers and has been well received.
- > Staff has commenced participating in a cross-training program between KCDC and the Pre-Trial Facility to allow staff to work assignments at either location.
- Aramark is now responsible for canteen services at both facilities.

Physical Environment

The inspection included a walkthrough of the facility that included housing areas, programming rooms, intake, kitchen, laundry, property room, and health services unit. Overall, the Kenosha County Detention Center remains in good condition. It continues to be apparent that staff is holding inmates accountable for their living areas as the dayrooms in the dormitories were found to be free of debris, and the cellblock areas were found to be relatively well maintained.

The kitchen area was found to be clean and well maintained. Safety and sanitation inspections of the housing units continue to be completed on a daily basis, which has enabled staff to maintain a clean and healthy environment.

However, there were a couple of physical environment issues that are in need of attention. The indoor recreation windows in D North/South were found to be filthy and in need of cleaning. Detainees housed in D North complained during the inspection that there was no hot water emanating from their cell sinks. Please ensure that maintenance addresses these concerns.

Jail Operations

Security practices are being completed as required, including monthly door and lock inspections, fire inspections (last completed by the Kenosha Fire Department on 10/23/17 and 4/11/17), monthly fire safety inspections (including SCBA checks and fire extinguishers), monthly fire

drills on each shift, shakedowns, formal head counts each shift, and physical security observation checks. A number of additional logs are being completed on a basis, including pat downs and footlocker searches, razor distribution, tool inventory, key control inventory, security inspections, and general maintenance concerns. Objective jail classification continues to operate systemically for the county
A random review of the electronic Guard1 Plus printouts indicated that many of the physical security checks are being completed beyond the requirement set forth in Kenosha County Detention Center policy. Although not a violation of Wisconsin Administrative Code, Chapter DOC 350 which stipulates that security checks of inmates in general population be completed a minimum of every 60 minutes, the KCDC checks are in violation of the facility's policy. Security checks for those inmates identified as special needs or a suicide risk are being completed minutes. Although the checks were in accordance with administrative code, a number of them were found to be exactly on the quarter hour (e.g., 8:00, 8:15, 8:30, and 8:45) instead of at irregular intervals.
In order to comply with KCDC policy, administration can either enforce the requirement or modify the current policy to provide more time to complete the checks. However, considering that the vast majority of the housing units at the facility are direct supervision units, it is recommended that administration enforce, rather than modify, the current physical security check policy. In addition, please ensure that security checks of those on a suicide watch be completed at irregular intervals.

Pursuant to administrative code, each individual admitted to the facility is provided with access to the Kenosha County Detention Center handbook that includes the rules and regulations as well as other pertinent information. This information is now available through the inmate tablet system as is other pertinent information regarding the facility. Additional jail information is also posted throughout the facility and in the housing unit dayrooms.

A disciplinary system is in place to address inmate rule violations. A range of sanctions are in place that is dependent upon the type of infraction violated. Disciplinary hearings for inmates charged with major infractions continue to be completed within 7 days as required in

administrative code (typically 48 hours). Disciplinary appeals are initially handled by a supervisor, and then reviewed by KCDC's disciplinary hearing committee if necessary. A record of all actions is maintained. A review of disciplinary reports and subsequent hearing showed them to be well written and explanatory as to why a decision was rendered. However, it was unclear as to why it appears that inmate discipline is a grievable matter when it maintains its own appeal system. It was suggested that administration reviews this process.

Objective jail classification continues to be used to determine inmate housing assignments, and an inmate grievance procedure is in place that permits inmates to address any concerns regarding the conditions of their confinement. The database being used to track and log inmate grievances is a good tool that allows administration to monitor the facility's inmate climate. A grievance appeal process is also in place with supervisory staff responding and, if appealed further, to a grievance committee for review.

As noted in past inspection reports, completed use of force reports and its ensuing review process is excellent. Staff continues to provide detailed information on their actions, as well as those of the inmate. All use of force reports are reviewed by the Sergeants who are also POSC instructors, as well as the Lieutenant. The information being provided for all use of force reports is extensive and detailed which is an excellent practice.

Health Care

Health care services at the Detention Center continue to be operated by Kenosha Visiting Nurses Association (KVNA). Nursing staff availability to inmates at the Detention Center has been reduced back to approximately 16 hours per day, 7 days a week. At the end of 2016 and in a number of months in 2017, nursing was increased to 24/7 until a decision was made to revert back to the 16 hour days.

The Physician is contracted through a local provider for approximately 2 hours per week, with a Nurse Practitioner on-site for 20 hours per week. There is also another Nurse Practitioner in an administrative capacity on-site for an additional 8 hours per week. Dental services are provided once per week for approximately 3 hours. Mental health services continue to be expanded between both facilities, with a qualified mental health professional on site at KCDC for approximately 53 hours per week (Psychologist 15 hours, LCSW 20 hours, ACSW 12 hours, and another LCSW for 6 hours).

Similar to past years, the inmate health screening is completed on each individual booked into the Pre-Trial Facility, with nursing staff at KCDC conducting a review of the form when an inmate or detainee is transferred to their facility. Health assessments of inmates are occurring within 14 days

There are procedures in place for health care request forms to be collected twice per day, and a routine sick call schedule is in place. Inmates/detainees are typically being triaged within 24 hours of request, which is an excellent practice. Medications are being administered by nursing

staff generally twice per day, with the exception of Huber inmates. However, health care staff packages all medications for the Huber inmates and monitors the Medication Administration Records. All security staff receives annual in-service training on health care matters including the delivery and documentation of medications to inmates. Mental health staff is also completing the required suicide prevention training for security staff on an annual basis.

Food Service

Inmate meals at KCDC continue to be provided by county employees with the assistance of inmate workers. A review of the 5-week menu cycle showed that it offered a good variety of meals and is reviewed by a registered dietician. KCDC continues to prepare all meals for the Pre-Trial facility, which are then transported on a daily basis. At least 2 hot meals and, in most instances, 3hot meals are being provided daily with an average of 2,600-2,700 calories provided per day.

The kitchen area was again found to be clean and well organized. Knives and other sharps are being accounted for on a daily log,

Inmate kitchen workers were found to be in appropriate uniform and indicated that they are required to shower each day. Temperature logs are being documented daily for the coolers, freezers, and dishwasher as well as the food temperature when a hot meal is served.

The kitchen area continues to be inspected and certified by the Kenosha County Division of Health, Environmental Health Section. The last inspection was completed on 5/11/17 with no violations noted. Internal food service inspections continue to be completed on a weekly basis.

Programs and Inmate Services

A number of programming opportunities remain available to inmates confined at the Detention Center. Some of the multi-disciplinary programs include the following:

- ➤ Kenosha Unified School District for eligible inmates.
- Moore & Associates: Men's program (Criminal Thinking, Maleness to Manhood, AODA Stage 2 Recovery, Anger Management, and Coaching Dads); Women's program (AODA Stage 2 Recovery, Criminal Thinking, Parenting, and Anger Management).
- ➤ Women's & Children's: Men's and Women's program (Life Skills, Sexual Assault Education, and Domestic Violence).
- ➤ Hope Council: Women in recovery and codependency.
- ➤ Job Center: Job readiness and employment skills.
- ➤ Health Department: Health education.
- ➤ Walkin' in My Shoes program.
- Forever Free Program: 12 week spiritual AODA class through Chaplaincy.
- Aftercare Group: 8 week program that prepares inmates for release through Chaplaincy.
- ➤ Alcoholics Anonymous.

Narcotics Anonymous.

➤ Bible Study.

> Religious Services.

The inspection also included a review of the facility's practices regarding inmate services. Blankets are being exchanged on a monthly basis, with issued clothing items laundered twice per week, and linens once per week. The facility maintains policies and procedures for inmate services such as mail (incoming/outgoing), visitation, recreation, reading materials (including legal), and canteen. These policies and procedures indicate that all inmates and detainees housed at KCDC are being provided reasonable access to these services.

Approval

On the date of inspection there were **no violations of administrative code** found at the facility. You and your staff should be commended for the great work being accomplished to ensure the safety and security of Kenosha County. Lieutenant Eric Klinkhammer, Sergeant Doug Simpson, and the rest of the staff do an outstanding job with the operation and management of the facility.

The Kenosha County Detention Center is approved for operation by this Department. This approval is made with the expectation that continued compliance with the Department of Corrections Administrative Code, Chapter DOC 350 and applicable state statutes occurs.

I would like to thank Lieutenant Klinkhammer, Sergeant Doug Simpson, and the rest of the staff for their assistance and cooperation during this year's annual inspection. Please feel free to contact me should you have any questions, or if I may be of assistance to you and your Department.

Sincerely,

Gregory A. Bucholtz, Inspector

Office of Detention Facilities

Go a. Buhall

Cc: Marc Levin, Chief Deputy

Justin Miller, Captain

Eric Klinkhammer, Lieutenant

Kristi Dietz, ODF Director

File

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY:	Kenosha County Detention (Center	DA	TE: 12/19/17		
	INI	MATE HOUSING AND CLASSIFICA	TION			
	DOC 350.05 (3) (d) In jails that are constructed or substantially remodeled on or after September 1, 2014, double cells shall have a					
floor area of	at least 25 square feet of unencu	mbered space per occupant.				
COMPLIANC	E VE	RIFICATION				
Me	eets standard	Policy and procedure manual review		Previous compliance documented		
Ne	eds improvement	Sample of facility records reviewed		Other (specify):		
☐ No	n-compliant	Sight confirmation by inspector	,			
No	t reviewed	Verbal confirmation by facility staff				
Comments: 7	The Kenosha County Detention	on Center has not undergone any co	nstruc	ction or substantial remodel since		
9/1/14.						
DOC 350.06	(2) (d) DOC 250 07 (4) In inite th	at are constructed or substantially romed	alad n	rior to Sentember 1, 2014, to be used for		
double occu	pancy, a cell shall have a floor ar	at are constructed or substantially remod ea of at least 70 square feet. NOTE: ODF	recoc	inizes current code does not reflect the		
		1990, a cell shall have a floor area of at le				
COMPLIANC	E VE	RIFICATION				
Me	eets standard	Policy and procedure manual review	\boxtimes	Previous compliance documented		
	eds improvement	Sample of facility records reviewed	一首	Other (specify):		
	on-compliant	Sight confirmation by inspector				
	t reviewed	Verbal confirmation by facility staff				
Comments:	The cells on D-North, D-South	n, and H-East have sufficient square	foota	ge to meet code standards.		
		,,		g - 1 - 111 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		
DOC 350.20	Double celling. If approved by t	he department, the jail shall have policies	and p	procedures relating to double celling.		
			-	eds, including support staff and services		
		and security of the jail staff and inmates v				
joint determi	ination shall be in writing and sig	ned by the representatives of the county	board	and the sheriff and shall be filed with the		
		hall remain in effect until rescinded or an				
county board	d and sheriff. Unless there is add	quate staff as agreed upon by the county	board	and sheriff, double celling may not		
occur.						
		oard and Sheriff is on file with the departr	nent a	nd contains the following elements:		
	County Board and Sheriff agree to			animintunting staff		
	staffing pattern is detailed in the wr	health care staff, support and service staff a	ina aar	ministrative stail		
		ives of the County Board and the Sheriff				
COMPLIANC		RIFICATION				
_=	eets standard	Policy and procedure manual review		Previous compliance documented		
	eds improvement	Sample of facility records reviewed		Other (specify):		
	n-compliant	Sight confirmation by inspector				
No	t reviewed	Verbal confirmation by facility staff				
Comments:						

DOC-2744 (4/2015) DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: The jail maintains an objective classification system and meets the requirements of s. 302.36, Stats. DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: There is a sufficient number of cells available to maintain single occupancy. DOC 350.20 (4) Receiving cells may not be used for double occupancy. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All receiving cells are used for single occupancy only. DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification. DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process. DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects. DOC 350.21 (3) Review of prisoner classification decisions. The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: The Kenosha County Detention Center uses an objective classification instrument with officers trained in its

use. The form adheres to s. 302.36 Stats.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:
(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

:	All inmates are personally observed of In housing units of multiple cells, office		g each physical inspection. are encouraged to complete physical inspec	ctions	s from within the housing unit.
	50.18 (2) Supplemental observation. vations.	A۱	rideo monitoring system may be used to	supp	plement but not replace personal
DOC 3	50.18 (3) Documentation. Each observed	erva	tion shall be documented.		
COMP	LIANCE	VEF	RIFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
many check Pleas	checks to be over the minute its being completed every 60 min is ensure that staff adhere to cur	e po ute: ren	utes for inmates in general populatio licy requirement. Although administ s, KCDC was found to be in violation t KCDC policy. Physical security change a suicide watch. However, a	trative of the contraction of th	ve code requires a minimum of their physical security check policy. s are also being completed
docun	nented at least three times per day, w	ith a	•	tes.	Formal counts shall be completed and
		_	RIFICATION		
$\underline{\ \ }$	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	ents: Inmate counts are being co	mpl	eted 3 times per day at the beginnin	ig of	each shift.
DOC 3	Facility and area searches are complete.	-	ions of procedures for conducting and d and documented.	ocun	nenting facility and area searches.
COMP	LIANCE	VEF	RIFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	ents: Searches/shakedowns are rained.	beir	ng completed		. Documentation of all searches is
DOC 3		ions	of procedures for conducting and docu	ment	ing inmate pat down, strip and body cavity
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		

Comments: All inmates are searched upon their arrival into the KCDC. Procedures are in place to conduct strip searches of inmates. Body cavity searches, if warranted, are completed at the local hospital.

			nthly inspections shall be made to detern king order. Each inspection shall be docu		e if all jail doors and locks within and to the		
secure	The remote security controls of door All manufacturing doors, locks and r	s and	locks are all operable.	ıme	mea.		
COMPI	LIANCE	VER	IFICATION				
\square	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement	Ħ	Sample of facility records reviewed		Other (specify):		
一一	Non-compliant	Ħ					
一一	Not reviewed		Verbal confirmation by facility staff				
	ents: All doors and locks are che ng/closing doors, locking mecha		d and documented on a monthly basins, and releases.	S.	Staff appeared to be proficient in		
(a) (b)	All issued keys shall be inventoried	and a	and accessible in the event of an emergency				
COMPI	LIANCE	VER	RIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
DOC 3	50.18 (9) Weapons control. Introdu	ction	nd documented. Inmates do not have , availability, control, inventory, storage a rity devices and specification of the level	nd :	·		
	LIANCE	VER	RIFICATION				
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented		
	Needs improvement		Sample of facility records reviewed		Other (specify):		
	Non-compliant	\boxtimes	Sight confirmation by inspector				
	Not reviewed	\boxtimes	Verbal confirmation by facility staff				
	are safely stored and are not 50.18 (10) Tools and sharps contro	acce	roduction, availability, control, inventory,		· · · ·		
COMPI	LIANCE		RIFICATION				
	Meets standard		Policy and procedure manual review		Previous compliance documented		
	Needs improvement	$\overline{\nabla}$	Sample of facility records reviewed		Other (specify):		
\overline{H}	Non-compliant	$\frac{\square}{\square}$	Sight confirmation by inspector	Ш	Outer (specify).		
-	Not reviewed	$-\frac{\square}{\square}$	Verbal confirmation by facility staff				
<u> </u>		<u></u>		TI-	a lattale and allow manufactures as local to 100		
	ents: All tools and sharps are ch val and return of any sharp.	еске	a daily and documented on a form.	ıne	e kitchen also maintains a log for the		

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- a) Local fire department inspection requirements under sub. (5).
- b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- rraining of staff in equipment use and the evacuation of inmates
 - Staff training is documented.
-) A written evacuation plan

Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.				
COMPLIANCE	VERIFICATION			
Meets standard	Policy and procedure manual review	Previous compliance documented		
Needs improvement	Sample of facility records reviewed	Other (specify):		
Non-compliant	Sight confirmation by inspector			
Not reviewed	Verbal confirmation by facility staff			
protection equipment is in place, as we	City of Kenosha Fire Department were conell as SCBAs. Staff are trained on the use	of fire protection equipment.		
DOC 350.19 (3) The evacuation route devel place for jail staff in the jail.	oped as part of the evacuation plan under sub.	(2)(d) shall be posted in a conspicuous		
COMPLIANCE	VERIFICATION			
Meets standard	Policy and procedure manual review	Previous compliance documented		
Needs improvement	Sample of facility records reviewed	Other (specify):		
Non-compliant	Sight confirmation by inspector			
Not reviewed	Verbal confirmation by facility staff			
Comments: Evacuation routes are posted throughout the facility and in conspicuous places. DOC 350.19 (4) Fire safety evacuation and other procedures shall be practiced or simulated by all jail staff at least once every 12 months. Each practice or simulation shall be documented.				
DOC 350.19 (4) Fire safety evacuation and	other procedures shall be practiced or simulate	•		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I	other procedures shall be practiced or simulate	•		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I	other procedures shall be practiced or simulate be documented.	•		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall be COMPLIANCE	other procedures shall be practiced or simulate be documented. VERIFICATION	d by all jail staff at least once every 12		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I	other procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review	d by all jail staff at least once every 12 Previous compliance documented		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I COMPLIANCE Meets standard Needs improvement	other procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed	d by all jail staff at least once every 12 Previous compliance documented		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall is COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff completed on each shift.	d by all jail staff at least once every 12 Previous compliance documented Other (specify):		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall is COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being or DOC 350.19 (5) The facility shall be inspect maintained.	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff	d by all jail staff at least once every 12 Previous compliance documented Other (specify): ery 12 months and a record thereof shall be		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being to be maintained. The fire inspection report support	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff completed on each shift. ed by the local fire department at least once every second content of the con	d by all jail staff at least once every 12 Previous compliance documented Other (specify): ery 12 months and a record thereof shall be		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being to be maintained. The fire inspection report support	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff completed on each shift. ed by the local fire department at least once even so that the facility conforms to applicable fire safety	d by all jail staff at least once every 12 Previous compliance documented Other (specify): ery 12 months and a record thereof shall be		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall I COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being or maintained. The fire inspection report support COMPLIANCE Meets standard	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff completed on each shift. ed by the local fire department at least once events that the facility conforms to applicable fire safety VERIFICATION	d by all jail staff at least once every 12 Previous compliance documented Other (specify): ery 12 months and a record thereof shall be codes. Previous compliance documented		
DOC 350.19 (4) Fire safety evacuation and months. Each practice or simulation shall is COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: Monthly fire drills are being of DOC 350.19 (5) The facility shall be inspect maintained. The fire inspection report support COMPLIANCE	ther procedures shall be practiced or simulate be documented. VERIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff completed on each shift. ed by the local fire department at least once even as that the facility conforms to applicable fire safety VERIFICATION Policy and procedure manual review	Previous compliance documented Other (specify): ery 12 months and a record thereof shall be codes.		

Comments: The last fire inspection was completed on 10/23/17 by the City of Kenosha Fire Department.

DOG-2744 (4/2013)			
DOC 350.19 (6) There shall be monthly inspections shall be documented.	ect	ions of the facility to ensure compliance with	safety and fire prevention standards.
COMPLIANCE	/EF	RIFICATION	
Meets standard	X	Policy and procedure manual review	Previous compliance documented
Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	- (1)/
Not reviewed	X	Verbal confirmation by facility staff	
Comments: Weekly fire and safety inspec	ctio	ons are being completed and document	ed, including all fire protection
equipment.			
DOC 350.22 Use of Force. The jail shall have	e p	policies and procedures for the use of force.	
DOC 350.22 (1) Jail staff may use physical for prevent death or bodily injury to the staff may inmate from the jail. Staff may use only the Corporal punishment of inmates is forbidden	eml am	per, the inmate or someone else, unlawful da	mage to property, or the escape of an
		RIFICATION	
	\boxtimes	Policy and procedure manual review	Previous compliance documented
	\overline{X}	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	g outer (openity).
	$\overline{\boxtimes}$	Verbal confirmation by facility staff	
Comments: A review of a number of repo	orts	s showed that staff are providing detaile	d explanations of the incident(s)
DOC 350.22 (2) Any staff member who has a administrator or the staff member's supervis submitted by the end of the shift, unless oth	use sor ierv	the Lieutenant. d force to control an inmate or inmates shall describing the incident. The report shall incident authorized by the sheriff or sheriff's described to the sheriff or sheriff o	submit a written report to the sheriff, jail
• •			
		RIFICATION	Draviava samulianas da sumanta d
	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement	$\stackrel{\square}{\sqcap}$	Sample of facility records reviewed Sight confirmation by inspector	Other (specify):
Non-compliant Not reviewed	<u> </u>		
	<u>Ц</u>	Verbal confirmation by facility staff	
Comments: Staff provide well written rep	ort	s when force is required to control an ir	imate.
DOC 350.23 Use of restraints. The jail shall DOC 350.23 (1) Restraint devices are never			
200 000120 (1) Hoomanii actioco allo lietoi		ou de punienment una ale net appilea lenge.	
 Inventories are conducted and do 	cur	nented.	
DOC 350.23 (2) When an inmate is mechanic the shift, unless otherwise authorized by the use and corresponding wellness checks. Supervisory review is conducted a	sł	neriff or sheriff's designee. Documentation s	
		RIFICATION	
		Policy and procedure manual review	Previous compliance documented
Needs improvement	\square	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed	\exists	Verbal confirmation by facility staff	
Comments: Documentation is mandated	fo	··	estraint device, with health care
services immediately notified.		and the state of a most amount of routine r	condition devices, with floatin out

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.

(a) An inmate may be evaluated for custody classification following the imposition of discipline

- 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
- 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
- 6. Written decision stating discipline administered. Copy to inmate.
- 7. Inmate is notified of right to appeal and appeal procedure
- 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(α)	7 III II III II II II II II II II II II	tody classification following the imposition of discipline:
COMPLIA	ANCE	VERIFICATION
\boxtimes	Meets standard	Policy and procedure manual review Previous compliance documented
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	∀erbal confirmation by facility staff

Comments: Inmates are provided with notification of charges and right to a hearing 24 hours in advance, unless the inmate elects to waive their hearing. Hearings are being completed within 7 days, and typically within 48 hours. Disciplinary appeals are being completed by a supervisor and, if further appealed, to the disciplinary hearing committee for review.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

COMPLIA	ANCE	VER	IFICATION	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	
			oleted on each individual booked at the rred to KCDC and reviewed by nursin	

DOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.

COMPLIA	ANCE	VERI	FICATION	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	

Comments: A health assessment is being completed on each inmate within 14 days after admission to KCDC along with a TB test, if not already accomplished at the Pre-Trial Facility.

DOC 350.14 Inmate health care.	There shall be sufficient equipment,	material, space and supplies for	the performance of health care
services in a confidential manner			

COMPLIA	ANCE	VER	FICATION	
\boxtimes	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	

Comments: There are specific offices designated for health care services at KCDC. The space appears to be sufficient to meet the needs of the inmate population.

DOC-2744 (4/2015)				
DOC 350.14 (1) The sheriff shall provi inmates in custody.	de or sec	ure necessary medical and mental health	tre	atment and emergency dental care for
 All inmate requests for medical 	care are re	o request medical assessment or treatment. eviewed by health care staff. quests are documented by health care staff r	nem	nbers.
COMPLIANCE		LIFICATION		
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Needs improvement		Sample of facility records reviewed	T	Other (specify):
Non-compliant		Sight confirmation by inspector		2 (-1 7)
Not reviewed		Verbal confirmation by facility staff		
hours per day, and mental health	services	o request medical and mental health s via a qualified mental health profes eek, and a nurse practitioner for 20 h	sio	nal are available 53 hours per week.
DOC 350.14 (3) Health care staff shal compliance shall be maintained at the		mpliance with state and federal licensure	cer	tification and registration. Verification of
COMPLIANCE	VER	IFICATION		
Meets standard		Policy and procedure manual review		Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
Non-compliant	\boxtimes	Sight confirmation by inspector		
Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC 350.14 (4) Medical records shall	be kept s	copies of the licensure of medical a separate from other records and shall be	mai	ntained in a confidential manner in
		nd any other applicable state or federal lated and staff, the jail administrator and the		
COMPLIANCE	VER	IFICATION		
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
Non-compliant	\boxtimes	Sight confirmation by inspector		
Not reviewed		Verbal confirmation by facility staff		
Comments: All medical records are records (MARs) are set up by nur			fide	ential manner. Medical administration
DOC 350.14 (6) Officers shall receive screening at the time of admission.	documer	nted annual training on health care policie	es a	nd procedures, medications and health
COMPLIANCE	VER	IFICATION		
Meets standard		Policy and procedure manual review		Previous compliance documented
Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
Non-compliant		Sight confirmation by inspector		
Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comments: All staff receive annual form.	training	on health care procedures, medicati	on	administration and health screening

DOC	DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.					
DOC	DOC 350.15 (1) Documentation of health referrals made or health care provided.					
	350.15 (2) Maintenance of document					
	PLIANCE	_	RIFICATION	1		
		$\underline{\underline{M}}$	Policy and procedure manual review	Previous compliance documented		
	Needs improvement	\square	Sample of facility records reviewed	Other (specify):		
	Non-compliant	<u> </u>	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comn	nents: All medical records are ma	intai	ned in the health care office in a confide	ential manner.		
DOC	250.15 (2) Names addresses and tal	anha	no numbers of health care providers or agen	sice who have agreed to provide		
	gency and routine health care service		ne numbers of health care providers or agen	cies who have agreed to provide		
OIIIOI;	gonoy and roamic near our our oci vice	.0 .0.	minuto.			
•	Contact information is available to st	aff.				
COM	PLIANCE	VEF	RIFICATION			
	Meets standard		Policy and procedure manual review	Previous compliance documented		
	Needs improvement	H	Sample of facility records reviewed	Other (specify):		
	Non-compliant	ᆸ	Sight confirmation by inspector			
-	Not reviewed	X	Verbal confirmation by facility staff			
		mac	ct information for medical emergencies	and other services needed at the		
facili	ty.					
DOC	350.15 (4) Referral of an inmate to jai	il hea	Ith care staff or to other agencies that provide	le health care.		
•	Health care referrals are made and of Staff are knowledgeable about the h					
0014						
	PLIANCE		RIFICATION	1		
			Policy and procedure manual review	Previous compliance documented		
	Needs improvement	<u> </u>	Sample of facility records reviewed	Other (specify):		
	Non-compliant	$\underline{\boxtimes}$	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			
Comn	nents: A medical and mental heal	th re	quest form is readily available to all inm	ates. All health care referrals are		
docu	mented in the inmate's medical i	eco	⁻ d.			
DOC	350.15 (5) Designation of staff who h	ave a	authority to make health care decisions, inclu	iding emergency medical and dental care.		
DOC	350 15 (6) Non-emergency health car	o in	cluding the use of an inmate's personal phys	ician		
DOC	330.13 (b) Non-emergency health car	c , iii	cluding the use of an initiate's personal phys	ician.		
COM	PLIANCE	VER	RIFICATION			
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented		
Ī	Needs improvement	Ħ	Sample of facility records reviewed	Other (specify):		
	Non-compliant	Ħ	Sight confirmation by inspector			
	Not reviewed	Ħ	Verbal confirmation by facility staff			
		<u>لکا</u> ام مطار		polologo including omorgonov		
			has the authority to make health care de			
Situa	tions. All supervisors, jail admin	istra	tion, and health care staff have such au	thority.		

DOC	-2744 (4/2015)				
DOC 3	350.15 (7) Schedule of inmate ac	cess to re	outine medical care.		
	list, or other appropriate means.		care is provided to inmates in writing via har		ook, posted notice, inmate rule and regulation able to read or write.
COMP	PLIANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review	П	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
一百	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\square}$	Verbal confirmation by facility staff		
maint neces	tains a schedule of seeing in ssary.	mates, a	on on how to request access to medic and schedule appointments for the ph		
DOC 3	350.15 (8) Provision for inmates	with chro	nic medical conditions.		
COMP	PLIANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC 3	Inmate medical requests are do	cumented	te medical requests on a daily basis. on an official medical request form. e retained in inmate's confidential medical file	·.	
COMP	PLIANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\square	Sample of facility records reviewed	Ħ	Other (specify):
一一	Non-compliant		Sight confirmation by inspector		Carlot (opcony).
一片	Not reviewed	X	Verbal confirmation by facility staff		
that t	hey obtain request slips twice	e where e each c	health care staff receive all requests lay. Request slips are readily availab	ole	a daily basis. Nursing staff indicated to all inmates. nd identification of the services provided,
	ling emergency services.		are documented in the inmate's confidential n		
COMP	PLIANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
	nents: Inmate medical files col mate refuses treatment.	ntain all	requests, treatment, and health care	no	tes, including documentation of when

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.15 (11) Provision of special diet if ordered by a qualified health care professional

- Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

COMPLIANCE		VERIFICATION				
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			

Comments: All special diets are approved by a qualified medical professional and forwarded to the food service manager.

DOC 350.15 (12) Pregnancy manage	ement.	
COMPLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review Previous compliance documented	
Needs improvement	Sample of facility records reviewed Other (specify):	
Non-compliant	Sight confirmation by inspector	
Not reviewed	∀erbal confirmation by facility staff	

Comments: The facility maintains a policy and protocol for pregnancy management.

DOC 350	.15 (13) Maintenance of agree	nents between the jail and providers of health care services.	
COMPLIA	ANCE	VERIFICATION	
\boxtimes	Meets standard	Policy and procedure manual review Previous compliance documented	
	Needs improvement	Sample of facility records reviewed Other (specify):	
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	∀erbal confirmation by facility staff	

Comments: The Kenosha County Sheriff's Office maintains a contract with KVNA for medical and mental health services. The physician is contracted through a local provider.

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
 - 1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
 - 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
 - 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
 - 1. The prison's or jail's medical staff.
 - 2. A prisoner's healthcare provider.
 - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
 - 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

Office	RTMENT OF CORRECTIONS of Detention Facilities 2744 (4/2015)				WISCONSIN
COMPL	,	VER	FICATION		
\square	Meets standard	X	Policy and procedure manual review	П	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
Ħ	Non-compliant		Sight confirmation by inspector		outer (opeony).
Ħ	Not reviewed	X	Verbal confirmation by facility staff		
		•	ems with the completion of the health	n tra	ansfer summary form or the receipt
trom o	itner jurisdictions. Nursing	starr com	plete the health transfer summary.		
(a) (b) (c)	Provision of treatment and super Documentation of the need for is Provision of laboratory screening	ne following vision of in olation or of for inmate	mates during isolation or quarantine under s uarantine under s. 252.06(6)(b), Stats., in the s who may have been exposed to a communication.	. 25 ne ir nica	nmate's confidential medical file. able disease if ordered by medical personnel.
	-		and decontaminating medical and dental eq	Juipi	ment in accordance with regulations.
COMPL			FICATION		
	Meets standard		Policy and procedure manual review	Щ	Previous compliance documented
<u> </u>	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comme	ents: Policies and procedure	s are in p	lace for communicable disease and	inf	ection control.
DOC 35	50.15 (16) Detoxification and m Appropriate housing and superv	_			
COMPL	LIANCE	VER	FICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Comme	ents: Procedures and protoc	ols are in	place for the detoxification and mar	nag	ement of intoxicated inmates.
and adı	ministration of prescription and	l non-pres			procedures relating to the control, delivery reatments.
COMPL	IANCE	VER	FICATION		
\square	Meets standard	\boxtimes	Policy and procedure manual review	П	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
	Non-compliant		Sight confirmation by inspector		(/
Ħ	Not reviewed	X	Verbal confirmation by facility staff		
					of medications. All medications are the inmate population.
	50.16 (2) Designated trained ented training shall be provided			of	medication at prescribed times. Annua

COMPLIA	ANCE	VER	IFICATION		
\boxtimes	Meets standard		Policy and procedure manual review] P	revious compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed] 0	ther (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		

Comments: Annual training of staff is being completed by KVNA.

DOC 3		ite į	personnel that all medications brought in by	y ii	nmates or other persons for an inmate are
•	Verification of prescription medication	is p	performed by a health care provider or an appro	opr	riately trained designee.
COMPI	_IANCE \	VEF	RIFICATION		
\square	Meets standard	\boxtimes	Policy and procedure manual review	\Box	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	╗	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comme	ents: All medications brought into	the	e facility are verified by health care staf	ff.	
	50.16 (5) Any medications kept at the The storage of inmate medications may be medications that require refrigeration at the medications are medications.	jai akes are	kept in a separate, medical refrigerator, unless	at	is not accessible to inmates.
	locked container stored in a refrigerate				
		VEF	RIFICATION	_	
	Meets standard	Щ	Policy and procedure manual review	_	Previous compliance documented
<u>Ц</u>	Needs improvement	Щ	Sample of facility records reviewed	╝	Other (specify):
<u> </u>	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC 3	Personnel authorized to administer mo	edic	rescription and nonprescription medications attions are listed in the current policy and proce	s t	
	_IANCE \	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant	Ш	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	ents: Nursing staff is responsible finistered twice per day.	for	the administration of medications to in	ma	ates. Medication is generally
who ac	Iministered or delivered the medication 50.16 (8) All refusals of recommende	on, d o	elivered to an inmate shall be documented and the date and time of administration or drawn of the date and time of administration or drawn of the date and time of administration or drawn of the date and the date a	del II b	livery.
:	frequency, the date and time of admin prescription medication. The medication administration and de completeness, accuracy, and legibility	ed h iistri live '.	e, accurate, and legible. nealth care professional, the full (not abbreviate ation or delivery, and any special instructions of ry records are reviewed by the health care prove cumentation and inmate refusals of medication	or c	comments are documented for each er and/or jail administrator or designee for
				alt	c clearly indicated and documented.
			RIFICATION	_	
	Meets standard	\mathbb{X}	Policy and procedure manual review	ᆜ	Previous compliance documented
<u>Ц</u>	Needs improvement		Sample of facility records reviewed	┙	Other (specify):
<u> </u>	Non-compliant	Щ	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comme	ents: All medications are currently	/ be	eing documented on the MAR.		

DOC-2744 (4/2015) DOC 350.16 (9) Return of an inmate's medication inventoried at admission. DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer. The return of an inmate's medication is documented. Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy. Established protocols regarding the disposal of narcotic medications, including witness presence, are followed. Documentation of the disposition of the medication is retained in the inmate's medical file. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: A procedure is in place for officers to notify health care staff of when an inmate is being released in order to return any medications. Procedures are also in place for the disposal of medications or returning them to the pharmacy. HIGH RISK SUPERVISION DOC 350.17 Suicide prevention. The jail shall have policies and procedures relating to the supervision and housing of inmates who may be at risk of seriously injuring themselves. VERIFICATION COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policies and procedures are in place for the supervision and housing of inmates with suicidal ideation. DOC 350.17 (1) Obtaining documented information from the arresting or transporting agency to assess an inmate's potential for suicide or self-harm. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Booking currently occurs at the the Pre-Trial Facility. This procedure has been in operation for a number of years. DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk. Intake screening is performed on each new inmate. The answers to all screening questions are documented. The screening form is legible, accurate, and complete, including detailed narratives when necessary. Appropriate follow-up questions are asked and answers recorded, when suicide risk is indicated. Medical or mental health care professionals review intake screening reports when risk is indicated. A secondary security review of intake screening reports for completeness, accuracy, legibility, consistency, appropriateness of housing assignments, appropriateness of classification and risk assessments is conducted. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: The intake screening form is completed at the Pre-Trial Facility. However, upon transfer to KCDC, health

care staff review the form.

	e of Detention Facilities -2744 (4/2015)				
	350.17 (3) Procedure for placen nate on suicide watch shall incl			proce	dures relating to the procedure for placing
a) b) c)) Designation of housing areas a	nd security	visory staff if an inmate is identified as a s precautions for inmates who are placed of mates on suicide watch, including frequer	n suic	cide watch.
	PLIANCE		IFICATION	loy an	ad documentation of weimless checks.
		N 7		_	Draviaus compliance decumented
	Meets standard	X X	Policy and procedure manual review Sample of facility records reviewed	-	Previous compliance documented
$-\frac{\square}{\square}$	Needs improvement Non-compliant		Sight confirmation by inspector		Other (specify):
-H	Not reviewed		Verbal confirmation by facility staff		
			· · · · · · · · · · · · · · · · · · ·		ate needing to be placed on suicide
suicio quart	de watch. Physical security er hour. Documentation is	checks a also being	immediately notified. Specific hou re being completed at least every graintained. There is a need to con how staff are inputting Level II are	15 m hang	inutes, with some exactly on the gethe current "Suicide/Mental Health
			who may assess an inmate's level of s	suicid	e risk.
	PLIANCE		IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
_	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff on als are on site for approximately		
	le watch. Assessment by a qua	lified ment	health professionals within 12 hours all health professional shall be complete alified mental health professional are docu	ed as	
COMF	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
an in	mate on suicide watch. 350.17 (6) Identification of qua	lified ment			to remove an inmate from a suicide watch
status	s after an on-site face-to-face as	sessment.			
	PLIANCE		IFICATION		
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: Only a qualified menta	l health p	rofessional is authorized to remove	e an i	inmate from a suicide watch after an

on-site face-to-face assessment.

	of Detention Facilities 2744 (4/2015)				
	350.17 (7) Frequency of communic e watch.	ation	between health care and jail personnel r	reg	parding the status of an inmate who is on
•	is utilized.		ting information between correctional staff me inistration, and medical/mental health care pro		
-	involved, summary of content of disc			JVIC	uers is documented, including names of those
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
一一	Non-compliant	Ħ	Sight confirmation by inspector		у стол (ороспу).
一一	Not reviewed	X	Verbal confirmation by facility staff		
Comm	ents: Communication between m	edic	cal and mental health staff and securit	y s	staff appears to be good.
DOC 3	Staff demonstrate a working knowled Staff are familiar with the location an	dge o	a apparent suicide attempt, including life-su of first aid and emergency response measures. ective use of emergency response equipment. ponse, including use of emergency response e		
•			e in progress or suicide threat are documented		
COMP	LIANCE	\/E5	RIFICATION		
	Meets standard	VLI	Policy and procedure manual review		Previous compliance documented
$\overline{\Box}$			Sample of facility records reviewed		
	Needs improvement Non-compliant	$\overline{\Box}$	Sight confirmation by inspector		Other (specify):
$^{\rm H}$	Not reviewed		Verbal confirmation by facility staff		
				_	
	ents: All staff is trained in first aid ally during in-service.	ı, en	nergency response and the use of equ	uıp	oment. Training is completed
DOC 3	50.17 (9) Identification of persons to	o be	notified in case of attempted or completed	su	icides.
COMP	LIANCE	VEF	RIFICATION		
\square	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
Ħ	Non-compliant	Ħ	Sight confirmation by inspector	_	у сто (ороспу).
一一	Not reviewed	X	Verbal confirmation by facility staff		
Comm		o is t	to be notified in the event of an attemp	ote	ed or completed suicide.
DOC 3	50.17 (10) Documentation of action	s and	d decisions regarding inmates who are suic	cid	e risks, including all of the following:
(b) (c) (d) (e) (f) (g)	 Supervisory review of the relevant 	al hea docu	alth professional removing an inmate from a sumentation is completed.	uic	ide watch including name, date and time.
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):

Sight confirmation by inspector

Comments: All actions and decisions regarding an inmate placed on suicide watch are well documented.

Verbal confirmation by facility staff

Non-compliant Not reviewed

factor	• •	z nours of	annual documented staff training regard	iing s	suicide prevention and identification of ris
COMF	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	nents: In 2017 staff complete al in-service training.	ed a 2 ho	ur training block on jail suicide preve	entio	n and risk assessment as part of the
DOC:	350.17 (12) Access by staff to c	lebriefing	and support services.		
COMF	PLIANCE	VEF	RIFICATION		
X	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
Ť	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		g care (epocaly).
	Not reviewed		Verbal confirmation by facility staff		
Comn	nents: Procedures are in place		ff to have access to debriefing and	supp	oort services.
DOC:	350.17 (13) Implementation of a	n operation	onal review following a suicide or signific	cant s	suicide attempt.
COM	PLIANCE	VEF	RIFICATION		
X	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
=	Non-compliant		Sight confirmation by inspector	_	Curior (opeony).
+	Not reviewed		Verbal confirmation by facility staff		
suici	de attempt.		operational review to be completed		_
of an polici DOC meets	inmate in his or her cell or o es and procedures outlining the 350.25 (1) An inmate may be p s one of the following:	ther designer administration and the income and the	nated area to ensure personal safety a rative confinement proces. dministrative confinement if the inmate' n to the inmate, another person or property	nd so	ns a non-punitive, segregated confinemer ecurity within the jail. The jail shall hav ntinued presence in the general populatio
COM	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	$oxed{oxed}$	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	nents: A policy is in place for I inmates assigned to admin			conf	finement. Documentation is provided

an in supe	ma rvis	te and the supervisor shall determing sor, a jail staff member may place a	ne v in i	whether to place the inmate in administrative	may require administrative confinement of e confinement. In the absence of his or her staff member's supervisor shall review that fication.
COM	PLI	ANCE V	'ER	IFICATION	
\geq	1	Meets standard	X	Policy and procedure manual review	Previous compliance documented
		Needs improvement	X	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	X	Verbal confirmation by facility staff	
Comr	men	nts: All placements into administr	ati	ve confinement are reviewed by super	visory staff and the Lieutenant.
The s	sup sed	ervisor shall determine when the in I to the general population. Each rev	ma /ie\	te no longer presents a threat to the safety shall be documented.	supervisor at least once every seven days. y, security and order of the jail and may be
COM	PLI	ANCE V	ΈR	IFICATION	
	1	Meets standard	X	Policy and procedure manual review	Previous compliance documented
		Needs improvement	X	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	X	Verbal confirmation by facility staff	
	nist	trative confinement shall be docume	nte		the length of time the inmate remains in
					memerii.
				IFICATION	75
	<u> </u>		<u>×</u>	Policy and procedure manual review	Previous compliance documented
	1	Needs improvement Non-compliant	╡	Sample of facility records reviewed Sight confirmation by inspector	_ Other (specify):
	1	•	$\frac{1}{2}$	Verbal confirmation by facility staff	
		.	<u> </u>	<u> </u>	inmetals file
Comr	men	its: All assignments to administra	ativ	re confinement are documented in the RECORDS AND REPORTING	inmate's file.
DOC each relea	350 inn se a	nate, including name, residence, ag and releasing authority. If an inmate	e, s es	shall keep a register of all inmates. The regi sex, race, court order, time and cause of pl capes, the time and manner of the escape s	ster shall contain identifying information on acement and placing authority, and time of hall be recorded in the register.
	_		_	IFICATION	7
	1		$\underline{\underline{A}}$	Policy and procedure manual review	Previous compliance documented
<u></u>	<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed	_ Other (specify):
<u></u>	1	Non-compliant	<u>_</u>	Sight confirmation by inspector	
Comr	<u>J</u> men		<u>×</u> im:	Verbal confirmation by facility staff ates booked and housed in Kenosha C	county is being maintained.

DOC-2744 (4/2015) DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law. **VERIFICATION COMPLIANCE** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Records are being maintained in a confidential manner. KCDC is currently not authorized to house juvenile offenders. MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners. Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail. Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42. A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance. The jail is constantly clean and in a healthful condition. Inmate areas are free of graffiti, posters, wall coverings, etching, etc. All surfaces, equipment, and facilities are clean and in good repair. Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order. Inmate personal property allowed in the housing units is subject to limitations on volume and content. Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily. Inmates and staff are held accountable for housekeeping and sanitation deficiencies. Identified maintenance needs are addressed in a timely manner. Hallways are free of clutter and obstructions. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: Overall, the facility was found to be clean and well maintained. All inmates are furnished with bedding, clothing, toilet facilities, light and heat. In large part, it appears that staff are holding inmates accountable for their living area, dayroom and showers.

DOC-2744 (4/2015)		
DOC 350.12 Sanitation and Hygiene. The jail	shall have policies and procedures relating to	sanitation and hygiene.
DOC 350.12 (1) Facilities are required to be	elean and in good repair.	
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
	lean and well maintained during the inspinitation inspections are being completed practice.	
DOC 350.12 (2) Blankets shall be laundered DOC 350.12 (3) Sheets, pillowcases and mat DOC 350.12 (4) Clean towels shall be issued	tress covers shall be changed and washed at I	east weekly and before reissue.
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
	✓ Verbal confirmation by facility staff	
shall be covered with a fire retardant, water a clean and sanitary condition. The sheriff sl	d where there is a need for overnight detention of the control of	d pillows shall be kept in good repair and in ill be cleaned and sanitized before reissue.
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	Other (specify).
Not reviewed	✓ Verbal confirmation by facility staff	
	r inmate whose clothing has been confiscate	
including footwear, for use while the inmate	is in custody. Footwear shall be cleaned and s	sanitized before reissue.
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant [Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: All inmates were found to have	_	
Comments. All miniates were round to ha	re appropriate clothing and lootweat.	

DOC-2744 (4/2015) DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Inmate workers are used in the laundry area on a daily basis. All issued clothing items are being laundered twice a week. DOC 350.12 (10) Vermin and pests are controlled with an effective, documented program. Containers of poisonous compounds used for exterminating rodents or insects shall be prominently and distinctly labeled for easy identification of contents. Poisonous compounds shall be stored independently and separately from food and kitchenware in a locked area not accessible to inmates. **COMPLIANCE** VERIFICATION Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All chemicals are secured and separated from food service areas. Inmates do not have access unless supervised by staff. DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Hygiene items are being provided by the facility and are also available through canteen. DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Inmates are being provided cleaning materials on a daily basis. DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly. COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Staff are completing daily safety and sanitation inspections in each housing unit.

Office of Detention Facilities DOC-2744 (4/2015)

	50.12 (14) Common use grooming	g tools	are disinfected and cleaned before reiss	ue an	nd are stored in a secure area.	
COMPL	LIANCE	VER	IFICATION			
\square	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
dispos	sable razor, which is then disc	carded	and not reissued to another inmate		eary. Each inmate is provided with a	
DOC 35	50.12 (15) Property storage conta					
•	Property storage containers may in	nclude l	pags, bins, totes and lockers.			
COMPL	LIANCE	VER	IFICATION			
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
proced	dure for a number of years.			156.	The facililty has been completing this	
	50.12 (16) Trash is removed daily					
COMPL	IANCE	VER	IFICATION			
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed	\boxtimes	Verbal confirmation by facility staff			
Comme	ents: All trash is removed from	the da	ayrooms on a daily basis.			
DOC 35	50.12 (17) Hazardous waste shall	be disr	oosed of according to government regul	ations	S.	
COMPL		-	IFICATION			
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed	一一	Other (specify):	
一一	Non-compliant	一一	Sight confirmation by inspector		Guior (opeony).	
	Not reviewed	M	Verbal confirmation by facility staff			
Comme			voices communication by recently count			
			INMATE SERVICES			
			have policies and procedures relating t	to an	inmate grievance process and ensure it i	
COMPL	le to all inmates and includes at l		e level of appeal. IFICATION			
COMPL	Meets standard	VLN	Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed	+	Other (specify):	
- 	Non-compliant		Sight confirmation by inspector		Outer (specify).	
	Not reviewed	\square	Verbal confirmation by facility staff			
			•			
that pr	rovides administration with a r	measu	evance procedure. A grievance log re of the jail's inmate climate. A proper and, if further appealed, to the groups and the groups are the gr	oces	s is in place for inmates to appeal a	

DOC 350.27 Legal Access. The jail shall have policies and procedures to address inmates' access to the courts, their attorneys, and legal materials.						
COMPLIANCE	/ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
Comments: All inmates have reasonable	access to the courts, attorneys and lega	I materials.				
DOC 350.28 Indigence. The jail shall have p	olicies and procedures to address indigence.					
DOC 350.28 (1) The jail shall establish defin	itions and procedures to define indigence.					
DOC 350.28 (2) Inmates' access to health ca	re, programming and essential services is not	precluded by inability to pay.				
COMPLIANCE	/ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
	Verbal confirmation by facility staff					
Comments: Policies and procedures are	in place to address indigence. No inmat	e is denied access to health care or				
	ability to pay. There is no co-pay for the					
Programming is also available to the in		dilization of montal health convices.				
regramming to also available to the in	mate population.					
DOC 250 20 Mail. The icil shall have notice	and precedures relating to written contact	between inmeter and their families friends				
attorneys, the court system, government off	es and procedures relating to written contact icials and others.	between inmates and their families, friends,				
attorneys, the court system, government on						
DOC 350.29 (1) Provision for staff inspection	n and reading of non-privileged incoming and	outgoing mail.				
Otati dana aratuata a mada dan dan dan dan dan dan dan dan dan						
Starr demonstrate a working knowledg	e of the procedures for mail inspection.					
DOC 350.29 (2) Provision for the limited ins	pection of incoming and outgoing privileged n	nail.				
	e of the definition of privileged mail and the proce	dures for inspecting it.				
	'ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
Comments: Provision for incoming and outgoing mail is addressed in the inmate handbook. Inmates also confirmed the						
receipt of mail in a timely manner.						
DOC 350.29 (3) Delivery of all non-privileged and approved privileged incoming mail.						
 Inmate mail is delivered to inmates in a timely manner. 						
	<u> </u>					
	/ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement		Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	✓ Verbal confirmation by facility staff					
Comments: Inmates spoken with during the inspection indicated that they are receiving mail in a timely manner.						

Not reviewed

DOC-2744 (4/2015) DOC 350.29 (4) Inventory and disposition of contraband items found in mail. Contraband items are inventoried and documented. Contraband is promptly turned over to supervisory staff. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Contraband items are inventoried and documented. DOC 350.29 (5) Provision of postage to indigent inmates. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: A policy is in place for the provision of postage to indigent inmates. DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld. A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Inmates are being notified in a timely manner when outgoing or incoming mail is being withheld. DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation. DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted. DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times. Accommodations are made for visits to occur at times other than scheduled visiting times. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff Comments: Inmate are provided information regarding visitation, and a schedule is posted for visitors in the lobby and

on the Kenosha County Sheriff's Office website. Special visits may be authorized by KCDC administration.

DOC-2744 (4/2015)					
DOC 350.30 (3) Documentation of all visits through a visitor log or register.					
•	All non-jail staff members who enter th	e ja	il are documented on the visitor's log or other	r ap	ppropriate register.
COMP	LIANCE V	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	X	Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	X	Verbal confirmation by facility staff		
Comm	ents: A record is maintained for all	vi	sitations.		
DOC 3	50.30 (4) Establishment of a search p	olio	ey of visitors and their possessions.		
:	policies.	ubj ons	ect to strict guidelines regarding personal iten / Legal visitors are required to adhere to safe		carry-in equipment and compliance with jail rrectional practices limiting carry-in items and
COMP	LIANCE V	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	X	Sight confirmation by inspector		
	Not reviewed Verbal confirmation by facility staff				
	ents: Posting in jail lobby maintain		·	dul	e, in a place readily accessible to visitors
and in					
COMP	LIANCE V	ER	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	X	Sight confirmation by inspector		
	Not reviewed	X	Verbal confirmation by facility staff		
	ents: Posting of visitation procedure website.	res	and schedule is posted in the jail lob	by	and on the Kenosha County Sheriff's
			y for inmates before and after each visit.		
		ER	IFICATION		
	Meets standard	<u> </u>	Policy and procedure manual review	닏	Previous compliance documented
	Needs improvement	4	Sample of facility records reviewed	Ш	Other (specify):
$ \bigsqcup$	Non-compliant	<u>_</u>	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	ents: All inmate visits by the public fter each professional contact vis		e non-contact. Provisions are in plac	e t	for the searching of inmates before

DOC :		The jail	shall have policies and procedures rel	ating	to the provision of inmate programs and
DOC 3	350.31 (1) Use of community reso	urces, c	ontract providers, and volunteers autho	rized	by the sheriff.
DOC 3	350.31 (2) Notification to inmates	of availa	bility, eligibility, and schedules.		
DOC 3	350.31 (3) Conducting criminal ba	ckgroun	d checks on all volunteers, community	resou	urces, and contract providers.
DOC 3	350.31 (4) Orientation and training	g on faci	lity operations for all volunteers.		
	350.31 (5) Educational program tment of Public Instruction.	ming fo	r inmates who are under 18 years of	age	consistent with the requirements of the
COMF	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
with e	xisting state and federal statutes.	The jailus organ	shall have policies and procedures relations and clergy willing to conduct re	ating eligio	us services in the facility.
DOC 3	. ,		chedule of religious services available in edure for assessing and responding to inn		
COMF	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
place progr	for inmates to request progra am.	amming	n on the religious programming ava for all religions. Kenosha County of that may be kept on an inmate's person	main	tains an excellent Chaplaincy
•		-	s are consistently applied throughout the ja	ıil.	
	PLIANCE		IFICATION		
	Meets standard	$\underline{\qquad}$	Policy and procedure manual review	<u> </u>	Previous compliance documented
<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: Policies are in place for i	nmates	to request religious items through	the (Chaplaincy program.

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All volunteers and contract providers have a criminal background check completed prior to entering into the DOC 350.32 (5) Orientation and training on facility operations for all volunteers. Documentation of the orientation and volunteer agreement is on file. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All volunteers receive an orientation on facility operations prior to working within KCDC. DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation. DOC 350.33 (1) Identification of the recreational activities that are available. DOC 350.33 (2) Schedule of recreational activities. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Policies and procedures are in place for recreation. Both indoor and outdoor recreation is available at KCDC. DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors. **COMPLIANCE** VERIFICATION Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Inmates in general population have sufficient amounts of time for recreational activities, in both the dormitories and cellblocks (D-North, D-South, H-East). DOC 350.34 Publications. The jail shall have policies and procedures relating to access to publications. DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines. DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk.

DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials.

- There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail.
- All reading materials allowed to be brought in by visitors are subject to search.

Reading material restrictions are posted or otherwise accessible to inmates.

WISCONSIN **DEPARTMENT OF CORRECTIONS**

	ice of Detention Facilities 0C-2744 (4/2015)			
	MPLIANCE	VERI	FICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
Ť	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	Carlot (openal).
Ī	Not reviewed		Verbal confirmation by facility staff	
Com	ments: KCDC maintains policie	es and pr	ocedures for inmate access to pub	lications. Limitations on the amount of
	terial permitted in property stor	•	•	modific. Elimidations of the difficult of
		3		
DOC	cices for inmates.	e available	to eligible inmates.	nt and use of canteen, vending or other simila
		-	cted by the facility based upon inmate	classification of status.
	MPLIANCE		FICATION	
_ [2	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant Not reviewed		Sight confirmation by inspector	
			Verbal confirmation by facility staff	veekly basis from a private vendor.
DOC	350.11 Food Service. The jail sh	all have p	FOOD SERVICE olicies and procedures relating to food	service.
	350.11 (1) The jail shall provide r			ompleted and maintained in the facility files.
COM	//PLIANCE	VERI	FICATION	
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
	ments: Food service at KCDC egistered dietician.	is county	operated. A five week menu cycle	e is used, and all menus are reviewed by
	C 350.11 (3) An annual inspection umenting that the food service are			by a qualified, independent outside source
CON	//PLIANCE	VERI	FICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
	. An increation of the life	shop was	completed on E/11/17 by the Man	asha Causty Division of Health

Comments: An inspection of the kitchen was completed on 5/11/17 by the Kenosha County Division of Health, Environmental Health Section with no violations noted. Internal food service inspections are also being completed on a weekly basis.

DOC-2744 (4/2015) DOC 350.11 (4) Internal monthly inspection of the food service area is completed and documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Internal food service inspections are being completed on a weekly basis. DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: The kitchen area was found to be clean and well maintained. County food service employees and security staff complete routine inspections of the kitchen. DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: A review of the 90 day menu showed that three meals are being provided daily, two of which are hot. DOC 350.11 (7) Food temperatures are properly maintained. Documentation of daily food preparation temperatures is maintained. Documentation of periodic serving temperature readings is maintained. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Food temperatures are being completed and documented on a daily basis. DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures. Documentation of daily cooler and freezer temperatures is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Food items are being stored in appropriate locations and temperatures recorded.

DOC-2744 (4/2015) DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional. Documentation of special diet orders is maintained. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All requests for special diets are reviewed and approved by a qualified medical professional and forwarded to food service for implementation. All special diet orders are maintained in the inmate file. DOC 350.11 (10) An inmate may abstain from any foods that violate the inmate's religion. Consistent with available resources, the jail shall provide a substitute from other available foods from the menu served at the meal. The substitutions shall be consistent with sub. (1). **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: KCDC provides substitute meals for those inmates observing a religious diet. DOC 350.11 (11) Inmates assigned to the kitchen who prepare or serve food shall bathe or shower daily and be provided a clean uniform. DOC 350.11 (12) No person who is known to be infected with any illnesses transmittable by food or utensils may be employed or work as a food handler in a facility. DOC 350.11 (13) All persons who work in food service areas shall wear clean garments and clean caps or hairnets and shall keep their hands clean at all times when engaged in the handling of food, drink, utensils or equipment. Particular attention shall be given to the cleaning of the fingernails. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All inmates assigned to the kitchen are required to shower daily and are provided with a clean uniform, and hair and beard nets when applicable. Inmate kitchen workers also confirmed the requirement to shower daily. DOC 350.11 (14) Inmate workers are provided orientation and training prior to assignment in the kitchen area. Documentation of orientation and training is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: All inmates assigned to the kitchen receive orientation and training.

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.11 (15) Inmate workers are supervised throughout all aspects of food preparation and service. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: County food service employees are constantly monitoring inmate workers. Officers also complete regular security checks in the kitchen. DOC 350.11 (16) Food and drink shall be protected from contamination. Meals are covered during transit to and within the facility. VERIFICATION **COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Inmate meals are provided cafeteria style for the general population, with inmates escorted to the appropriate kitchen area to eat. Meals to segregation are covered during transit. Inmates housed in D-North and D-South are served their meals in the dayrooms. DOC 350.11 (17) Kitchen food storage and dishwashing equipment temperatures are routinely monitored and documented. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Food storage areas and dishwashing equipment temperatures are documented on a daily basis. DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Garbage containers were found to be covered and clean. DOC 350.11 (19) Cleaning agents are stored separately from food service items. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: Cleaning agents are being stored separately and away from food.

Office of Detention Facilities DOC-2744 (4/2015)

 DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times. Documentation of daily control and inventory is maintained. 						
COMPLIANCE	COMPLIANCE VERIFICATION					
Meets	standard	Policy and procedure manual review	Previous compliance documented			
Need	s improvement	Sample of facility records reviewed	Other (specify):			
Non-c	compliant	Sight confirmation by inspector				
Not re	eviewed	Verbal confirmation by facility staff				
	sharps and tools are lock in on a daily basis.	ed in	. All sharps are logged			